

ISSUE SLIP STAPLE AREA (for additional cross references)

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10/11/01  
09/487239

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	AT		2-3-00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

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**WARNING:**  
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Form PTO-436A  
Rev. 5-99

INDEX OF CLAIMS

Rejected N  
Allowed I  
Canceled A  
Restricted O

Non-elected  
Interference  
Appeal  
Objected

Claim	Date	Claim	Date	Claim	Date
Final Original		Final Original		Final Original	
1	2/1/01	51		101	
2	2/1/01	52		102	
3	2/1/01	53		103	
4	2/1/01	54		104	
5	2/1/01	55		105	
6	2/1/01	56		106	
7	2/1/01	57		107	
8	2/1/01	58		108	
9	2/1/01	59		109	
10	2/1/01	60		110	
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12	2/1/01	62		112	
13	2/1/01	63		113	
14	2/1/01	64		114	
15	2/1/01	65		115	
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17	2/1/01	67		117	
18	2/1/01	68		118	
19	2/1/01	69		119	
20	2/1/01	70		120	
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22	2/1/01	72		122	
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24	2/1/01	74		124	
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26	2/1/01	76		126	
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45	2/1/01	95		145	
46	2/1/01	96		146	
47	2/1/01	97		147	
48	2/1/01	98		148	
49	2/1/01	99		149	
50	2/1/01	100		150	

If more than 150 claims or 10 actions  
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